

# EMPLOYMENT OPPORTUNITY

20 East Sixth Street • Tempe, Arizona 85281 • 480/350-8276 • TDD 480/350-8400  
<http://www.tempe.gov>

Committed to Equal Opportunity and Reasonable Accommodation



## STREET MAINTENANCE EQUIPMENT OPERATOR I/II

(Public Works – Street Maintenance)

Recruitment Code #: 300212

(2 positions)

**OPENING DATE:** September 8, 2008

**CLOSING DATE:** Open until the needs of the City are met. First review of applications will be September 22, 2008; this position may close at that time.

**In addition to completing the City of Tempe application, applicants must complete the attached supplemental questionnaire(s).**

### ANNUAL SALARY RANGE

**Level I:** \$37,089 - \$50,075

**Level II:** \$39,947 - \$53,924

This position is FLSA Non-Exempt – eligible for overtime compensation and/or compensatory time.

Employees in this position are represented by the Service Employees International Union (SEIU).

**Position Information:** This position requires the ability to work an alternative 10 hours a day schedule, 6:00 a.m. to 4:30 p.m., including weekends and holidays. Shift work is required.

### MINIMUM QUALIFICATIONS

#### **Education:**

**For Both Levels:** Requires formal or informal education or training which ensures the ability to read and write at a level necessary for successful job performance.

#### **Work Experience:**

**Level I:** Requires the equivalent to one year of full-time labor/trade, heavy equipment operation, and/or commercial driving experience.

**Level II:** Requires the equivalent to two years of increasingly responsible, full-time street maintenance experience.

*Candidates must have the minimum amount of work experience. Education will not substitute for the required work experience; however, related unpaid and / or volunteer work experience may be used as qualifying work experience.*

#### **Certifications, Licenses, and/or Registrations:**

##### **Level I:**

- Possession of an appropriate, valid, Arizona driver's license at time of hire.
- Possession of, or ability to obtain within six months of hire, an appropriate, valid Arizona Class A driver's license with a tanker endorsement.

##### **Level II:**

- Possession of an appropriate, valid, Arizona Class A driver's license with a tanker endorsement
- Possession of a forklift certificate issued by the State of Arizona.

## ADDITIONAL REQUIREMENTS

If requesting veteran's preference, the appropriate DD214 must be attached at the time of application. Successful completion of probationary period is contingent upon passing an FBI background investigation.

## REPRESENTATIVE DUTIES

(For the complete job description go to: <http://www.tempe.gov/jims/>)

- Operate heavy construction equipment such as bulldozers, cranes, paving lay down machine, milling machine, power crack routers, crack sealant kettle, backhoe, street sweeper, motor grader, pavement roller, Ariel lift trucks, forklifts, large trucks, and front-end loaders for a variety of construction and maintenance operations.
- May provide lead supervision to maintenance staff.
- Break out and load asphalt and concrete onto large dump trucks.
- Load water at fire hydrants.
- Operate a variety of power tools including concrete saws, chain saws and jackhammers.
- Identify equipment needs for each assigned project.
- Perform additional construction and maintenance tasks such as concrete work, truck driving, spreading asphalt and patching, jack hammering and a variety of repair activities when equipment is not in use.
- Install traffic cones and barricades; route and control traffic around work site.
- Provide training to staff in the operation and maintenance of equipment.
- Respond to emergency calls assisting with traffic control and cleanup at accident sites.
- Graffiti removal.
- Perform related duties as assigned.

## SELECTION CRITERIA

An official City of Tempe application must be filled out in order to be considered for this position.

**Incomplete application or supplemental forms will result in being disqualified from further consideration.** Applicants whose experience and training most closely suit the needs of the city may be selected for further testing/interviews. The City of Tempe conducts thorough background checks. Falsifying information or lying during any stage of the selection/hiring process will make you ineligible for new or continued city employment.

**EAB/mcp**

## CDL SUPPLEMENT

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Current Address: \_\_\_\_\_  
Street Address City State Zip

Address for the past three years (attach sheet if more space is needed):

\_\_\_\_\_ How Long? \_\_\_\_\_  
Street Address City State Zip

\_\_\_\_\_ How Long? \_\_\_\_\_  
Street Address City State Zip

Please list all unexpired commercial motor vehicle operator's licenses or permits			
State	License Number	Type	Expiration Date

Please list all motor vehicle accidents in which you were involved the past three years regardless of fault. Attach another sheet if more space is needed.			
Dates	Nature of Accident (Head-On, Rear-End, etc.)	Fatalities	Injuries

Please list all traffic convictions and forfeitures, including fines, for the past three years (other than parking violations). Attach another sheet if more space is needed.			
Location	Date	Charge	Penalty

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle?  
Yes ☐ No ☐

B. Has any license, permit or privilege ever been suspended or revoked? Yes ☐ No ☐

If the answer to either A or B above is yes, please provide details (attach sheet if more space is needed):

Please list your driving experience in the table below. Include the type of medium and/or heavy equipment (i.e. bus, forklift, side loader, backhoe, gang mower, large truck, and crane) you have operated and include the length of time and skill level. Attach sheet if more space is needed.

Type of Medium / Heavy Equipment Operated	Dates		Skill Level			Please provide any additional information you can regarding: Vehicle's Make and Model; Size; Weight of Equipment; Type of Equipment; and for what employers; etc.
	From	To	Somewhat Skilled	Moderately Skilled	Very Skilled	
<b>Example:</b> Refuse Truck	5/23/99	5/22/01			X	Volvo WX; 26,000+ Gross Vehicle Weight; ACME Garbage Collection
Refuse Truck(s)						
Large Fork Lift(s)						
Bulldozer(s)						
Street Sweeper(s)						
Motor Grader(s)						
Bucket Truck(s)						
Front-End Loader(s)						
Large Trucks/Buses						
Other:						

I hereby certify that all statement contained herein are true to the best of my knowledge. I understand that omissions or misstatements may be cause for rejection of this application, removal of my name from an eligibility list(s), and/or discharge from City Service. I understand that this information is subject to verification with my former employers.

Signature

Date



# City of Tempe / Application for Employment

City of Tempe / Human Resources / 20 East Sixth Street / Tempe AZ 85281 / (480) 350-8276 / TDD (480) 350-8400 / <http://www.tempe.gov>

**The City of Tempe is an Equal Opportunity / Reasonable Accommodation Employer.**

***The City of Tempe Promotes a Drug and Alcohol Free Workplace.***

## **DIRECTIONS:**

Read the recruitment bulletin before completing this application - request a copy if not provided. Answer all questions completely including any supplemental forms. Type or print neatly in black ink. Sign this application and all other forms. Any omission, misstatement, or falsification may be cause for rejection of this application, removal of your name from an eligibility list, or discharge from City Service.

1. Position Applying For: \_\_\_\_\_ Recruitment Code (RC#): \_\_\_\_\_
2. Name (Last, First, Middle Initial): \_\_\_\_\_
3. Social Security Number: \_\_\_\_\_
4. Mailing Address: \_\_\_\_\_  
Street Address City State Zip
5. Phone Number: HOME: \_\_\_\_\_ WORK: \_\_\_\_\_
6. Driver's License (Number, State, Class): \_\_\_\_\_
7. Are you a U.S. Citizen or a non-U.S. Citizen authorized to work in the United States? Yes No
8. Have you ever worked for the City of Tempe? Yes No If Yes, from \_\_\_\_\_ (Mo/Yr) to \_\_\_\_\_ (Mo/Yr)  
If you are a current City of Tempe employee, are you: Temporary? Regular?  
Have you completed your initial six (6) month probationary period? Yes No
9. To assist us with verifying previous work experience and /or education, please list other names you have gone by:  
\_\_\_\_\_
10. Type of position you will accept: Full Time Part Time Regular Temporary
11. Are you claiming Civil Service Preference for Veteran's under ARS 38-492:
  - As a qualified or disabled veteran? Yes No If yes, you must submit Form DD214, or certification from the Veteran's Administration.
  - As a spouse of an eligible veteran pursuant to ARS 38-492(D)? Yes No If yes, you must submit Form DD214, or certification from the Veteran's Administration.
12. Are you related to any member of the Tempe City Council or any Tempe Commission/Board Member, or any City of Tempe employee? Yes No If Yes, indicate his/her **Name, Position, and Relationship to you:**  
\_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE - TURN PAGE AND CONTINUE**

Q ☐ NQ ☐ A ☐ B ☐ C ☐ Application Entered ☐

HR Review ☐

Date

Department Review ☐

Date

***Proof of Education and/or Professional Registration(s), License(s), and Certification(s) will be required prior to hire/promotion.***

13. Do you have a High School Diploma or a G.E.D.?      Yes      No

14. Education from an **Accredited** College/University:

College:	Major:	Type of Degree:	Degree Completed:	Credit Hours:
			Yes    No	
			Yes    No	
			Yes    No	
			Yes    No	

15. Trade and/or Technical Schools:

Trade/Technical School:	Subject Studied:	Type of Degree:	Degree Completed:	Credit Hours:
			Yes    No	
			Yes    No	

16a. Professional Registration(s), License(s), and/or Certification(s) you possess ***that relate to this position:***

Type of Professional Registration, License, and/or Certification:	License Number (if applicable):	Date Received:	Expiration Date (if applicable):

16b. Special training ***that relates to this position:***

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17. List computer software program(s) with which you are proficient in operating ***that relate to this position:***

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18. List equipment with which you are proficient in operating ***that relate to this position:***

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19. Language Proficiency (Other than English):

Language:	Speak:	Read:	Write:
	Yes    No	Yes    No	Yes    No
	Yes    No	Yes    No	Yes    No
	Yes    No	Yes    No	Yes    No

20. **May we contact your current employer if you are considered for hire/promotion?**      Yes      No

***You may make copies and use as many of these sheets as necessary to continue your employment history.***

Begin with your present or most recent position. List all jobs, paid or volunteer, for at least the past ten years. Your qualifications will be evaluated **solely** on the application form and, if applicable, any supplemental questionnaire(s).

RESUMES MAY **NOT** BE SUBSTITUTED FOR THE REQUESTED INFORMATION.

**DO NOT WRITE "SEE RESUME" IN THE SPACES BELOW.**

Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Present/Ending Wage: \$ Per		
Work Performed:			
Reason for Leaving:			

Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Ending Wage: \$ Per		
Work Performed:			
Reason for Leaving:			

Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Ending Wage: \$ Per		
Work Performed:			
Reason for Leaving:			

***You may make copies and use as many of these sheets as necessary to continue your employment history.***

Begin with your present or most recent position. List all jobs, paid or volunteer, for at least the past ten years. Your qualifications will be evaluated **solely** on the application form and, if applicable, any supplemental questionnaire(s).

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Employer:	Type of Business:
Address:	Phone:
Job Title:	Number of Employees Supervised:
Supervisor (Name/Title/Phone):	
Employment Dates: from (Mo/Yr) to (Mo/Yr)	Total Time Employed: Yrs Mos
Hours Per Week:	Present/Ending Wage: \$ Per
Work Performed:	
Reason for Leaving:	

Employer:	Type of Business:
Address:	Phone:
Job Title:	Number of Employees Supervised:
Supervisor (Name/Title/Phone):	
Employment Dates: from (Mo/Yr) to (Mo/Yr)	Total Time Employed: Yrs Mos
Hours Per Week:	Ending Wage: \$ Per
Work Performed:	
Reason for Leaving:	

Employer:	Type of Business:
Address:	Phone:
Job Title:	Number of Employees Supervised:
Supervisor (Name/Title/Phone):	
Employment Dates: from (Mo/Yr) to (Mo/Yr)	Total Time Employed: Yrs Mos
Hours Per Week:	Ending Wage: \$ Per
Work Performed:	
Reason for Leaving:	



Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Ending Wage: \$		Per
Work Performed:			
Reason for Leaving:			

21. Have you ever been requested or forced to resign from a position for misconduct or unsatisfactory service?

Yes No If Yes, please explain:

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22. Have you ever been convicted of a **misdemeanor** or **felony** (other than minor/civil traffic offenses), placed on probation, fined or given a suspended sentence (include military trial convictions)?

*Note: Reckless operation, hit-and-run, D.U.I., excessive speeding, and similar charges are NOT considered minor traffic offenses. Moreover, an excessive number of traffic violations (including minor/civil offenses) should be reported.*

Yes No If Yes, provide charges, dates and locations:

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**Convictions will not automatically bar an applicant from employment for City jobs. The relationship of the conviction to the job, as well as its severity, the passage of time, and subsequent job performance will all be considered.**

**PLEASE READ THIS STATEMENT AND CAREFULLY REVIEW YOUR ENTIRE APPLICATION MATERIAL .**

I certify that all statements made on the application form and, if applicable, any supplemental questionnaire(s) are true and complete. I understand that any omission, misstatement, or falsification may be cause for rejection of this application, removal of my name from an eligibility list(s), and/or discharge from City Service. In addition, I authorize any individual, company, organization, or institution to release any and all information concerning statements made by me on this application, and I do hereby release all parties and individuals connected therewith from all liabilities for any damages whatsoever incurred in furnishing such information.

By checking this box and typing your name below, you certify that you have read and understand the above paragraph.

Print Applicant's Name: \_\_\_\_\_ Date\_\_\_\_\_

Applicant Signature\_\_\_\_\_ Date\_\_\_\_\_

***The City of Tempe does not accept faxed copies of applications.***



## Optional Employment Data Record

Completing ethnicity, gender, age and disability information is **OPTIONAL**; it is used for statistical reporting purposes only. It is **NOT** disclosed to the hiring department.

Position Applied for: \_\_\_\_\_ RC#: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First

Gender: Female Male

Disabled: Yes No

**Ethnic Group:**

White

Black

Hispanic

Asian

American Indian

Other

**Age Group:**

16 and under

17 – 20

21 – 29

30 – 39

40 +

Highest grade completed: \_\_\_\_\_

How did you hear about this position: \_\_\_\_\_